Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF INDIANA		
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this is an amended filing

### Official Form 101

# Voluntary Petition for Individuals Filing for Bankruptcy

12/22

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself			
		About Debtor 1:	Abou	t Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on your government-issued	Ruthie	Final	
	picture identification (for example, your driver's	First name	First	ame
	license or passport).	Ann Middle name	Middl	e name
	Bring your picture identification to your meeting with the trustee.	Rhodes		
		Last name and Suffix (Sr., Jr., II, III)	Last r	ame and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years			
	Include your married or maiden names and any assumed, trade names and doing business as names.			
	Do NOT list the name of any separate legal entity such as a corporation, partnership, or LLC that is not filing this petition.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-2724		

Debtor 1 Ruthie Ann Rhodes Case number (if known) About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Your Employer **Identification Number** (EIN), if any. EIN EIN Where you live If Debtor 2 lives at a different address: 1124 Lake Forest Drive #A Fort Wayne, IN 46815 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code Allen County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Check one: Why you are choosing Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, I Over the last 180 days before filing this petition, have lived in this district longer than in any other I have lived in this district longer than in any district. other district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

Debtor 1 Ruthie Ann Rhodes				Case number (if known)			
Par	t 2: Tell the Court About	our Bankruptcy	Case				
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.					
	choosing to file under	Chapter 7					
		☐ Chapter 11					
		☐ Chapter 12					
		☐ Chapter 13					
8.	How you will pay the fee	about how order. If yo	I will pay the entire fee when I file my petition. Please check with the clerk's office in your local cou about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit a pre-printed address.				
					on, sign and attach the Application for In	ndividuals to Pay	
The Filing Fee in Installments (Official Form 103A).  I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line					ial poverty line that		
					n installments). If you choose this option cial Form 103B) and file it with your petit		
9. Have you filed for bankruptcy within the ■ No.							
	last 8 years?	☐ Yes.					
		Distric	et	When	Case number		
		Distric	et	When	Case number		
		Distric		When	Case number		
10.	Are any bankruptcy cases pending or being	■ No					
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.					
		Debto	r		Relationship to you		
		Distric	et	When	Case number, if known		
		Debto	r		Relationship to you		
		Distric	et	When	Case number, if known _		
11.	Do you rent your residence?	□ No. Go to	o line 12.				
		■ Yes. Has	your landlord obtai	ned an eviction judgment agains	t you?		
			No. Go to line 1	2.			
			Yes. Fill out <i>Init</i> bankruptcy petit		Judgment Against You (Form 101A) and	d file it with this	

DCL	Rutille Allii Kilou	<del></del>		Case Humber (II known)
Par	Report About Any Bu	usinesses	You Own as a Sole Propri	etor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.	
		☐ Yes.	Name and location of be	usiness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if an	
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, St	ate & ZIP Code
	it to this petition.		Check the appropriate b	pox to describe your business:
			☐ Health Care Bus	siness (as defined in 11 U.S.C. § 101(27A))
			☐ Single Asset Re	al Estate (as defined in 11 U.S.C. § 101(51B))
				defined in 11 U.S.C. § 101(53A))
				ker (as defined in 11 U.S.C. § 101(6))
			☐ None of the abo	ve
13.	Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor or a debtor as defined by 11 U.S. C. § 1182(1)?	proceed you are	under Subchapter V so that choosing to proceed under S w statement, and federal inc	e court must know whether you are a small business debtor or a debtor choosing to a text can set appropriate deadlines. If you indicate that you are a small business debtor or Subchapter V, you must attach your most recent balance sheet, statement of operations, ome tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. apter 11.
	For a definition of small business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapte Code.	er 11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.		er 11, I am a small business debtor according to the definition in the Bankruptcy Code, and ed under Subchapter V of Chapter 11.
		☐ Yes.		er 11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I er Subchapter V of Chapter 11.
Par	t 4: Report if You Own or	r Have Any	y Hazardous Property or A	ny Property That Needs Immediate Attention
14.	,	■ No.		
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is the hazard?	
	public health or safety? Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?	
	- •			Number, Street, City, State & Zip Code

Debtor 1 Ruthie Ann Rhodes Case number (if known)

Part 5: Explain Your

Explain Your Efforts to Receive a Briefing About Credit Counseling

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### □ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	otor 1 Ruthie Ann Rhode	es	S Case number (if known)			
Par	t 6: Answer These Quest	ions for R	eporting Purposes			
16.	What kind of debts do you have?	16a.		consumer debts? Consumer debts are rsonal, family, or household purpose."	e defined in 11 U.S.C. § 101(8) as "incurred by an	
			☐ No. Go to line 16b.			
			Yes. Go to line 17.			
		16b.		business debts? Business debts are detection of the		
			☐ No. Go to line 16c.			
			☐ Yes. Go to line 17.			
		16c.	State the type of debts you	owe that are not consumer debts or bu	usiness debts	
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapte	er 7. Go to line 18.		
	Do you estimate that after any exempt property is excluded and	■ Yes.		Do you estimate that after any exemple available to distribute to unsecured cred	t property is excluded and administrative expenses ditors?	
	administrative expenses		■ No			
	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes			
18.	How many Creditors do	<b>■</b> 1-49		□ 1,000-5,000	□ 25,001-50,000	
	you estimate that you owe?	☐ 50-99	)	☐ 5001-10,000	☐ 50,001-100,000	
		□ 100-1 □ 200-9		□ 10,001-25,000	☐ More than100,000	
19.	How much do you		550,000	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion	
	estimate your assets to be worth?	□ \$50,0	01 - \$100,000	□ \$10,000,001 - \$50 million	\$1,000,000,001 - \$10 billion	
			001 - \$500,000 001 - \$1 million	□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million		
20.	How much do you	□ \$0 - \$	550,000	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion	
	estimate your liabilities to be?		001 - \$100,000	□ \$10,000,001 - \$50 million	\$1,000,000,001 - \$10 billion	
			001 - \$500,000 001 - \$1 million	□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	_ + -,, +	
Par	t 7: Sign Below					
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.				
					gible, under Chapter 7, 11,12, or 13 of title 11, d I choose to proceed under Chapter 7.	
		If no atto	rney represents me and I did nt, I have obtained and read t	I not pay or agree to pay someone who the notice required by 11 U.S.C. § 342(	is not an attorney to help me fill out this b).	
I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.					e, specified in this petition.	
I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 134 and 3571.						
		Ruthie	nie Ann Rhodes Ann Rhodes e of Debtor 1	Signature of [	Debtor 2	
		Executed	d on <b>March 1, 2024</b>	Executed on		
			MM / DD / YYYY		MM / DD / YYYY	

Debtor 1	Ruthie Ann Rhodes	Case number (if known)	

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Steven J. Glaser	Date	March 1, 2024
Signature of Attorney for Debtor		MM / DD / YYYY
Steven J. Glaser 15173-02		
Glaser & Ebbs Firm name		
132 E Berry St		
Fort Wayne, IN 46802		
Number, Street, City, State & ZIP Code		
Contact phone <b>260-424-0954</b>	Email address	
15173-02 IN		
Bar number & State		

Filli	n this inform	ation to identify your	case:				
Deb	tor 1	Ruthie Ann Rhode			_		
Deb	tor 2	First Name	Middle Name	Last Name			
	ise if, filing)	First Name	Middle Name	Last Name	-		
Unit	ed States Ban	kruptcy Court for the:	NORTHERN DISTRIC	CT OF INDIANA	_		
Case (if knd	e number				С	_	if this is an ded filing
						amon	aca ming
Off	icial For	m 106Sum					
			and Liabilities a	and Certain Statistical Infori	mation	1	2/15
Be as	s complete ar mation. Fill o	nd accurate as possib ut all of your schedule	le. If two married peopes first; then complete	ole are filing together, both are equally reset the information on this form. If you are fieck the box at the top of this page.	sponsible for		
Part	1: Summa	rize Your Assets					
						Your as Value o	ssets f what you own
1.	Schedule A/I 1a. Copy line	<b>B: Property</b> (Official Fo	orm 106A/B) om Schedule A/B			\$	0.00
				В		\$	11,279.17
	1c. Copy line	63, Total of all property	on Schedule A/B			\$	11,279.17
Part	2: Summa	rize Your Liabilities					
							abilities you owe
2.			aims Secured by Prope nn A, Amount of claim, a	rty (Official Form 106D) at the bottom of the last page of Part 1 of <i>Sc</i>	hedule D	\$	5,933.00
3.			Unsecured Claims (Offic 1 (priority unsecured cla	cial Form 106E/F) nims) from line 6e of <i>Schedule E/F</i>		\$	0.00
	3b. Copy the	total claims from Part 2	2 (nonpriority unsecured	d claims) from line 6j of Schedule E/F		\$	65,051.00
				Your tota	al liabilities	S	70,984.00
							,
Part	3: Summa	rize Your Income and	Expenses				
4.		our Income (Official Fo		ule I		\$	2,154.00
5.		Your Expenses (Official onthly expenses from lin				\$	2,105.00
Part	4: Answer	These Questions for	Administrative and Sta	atistical Records			
6.	-	• • •	er Chapters 7, 11, or 13	3? Check this box and submit this form to the c	court with your	other sch	edules
	■ Yes	That's hourning to report	on the part of the form.		our maryour	01101 001	oudioo.
7.		debt do you have?					
				er debts are those "incurred by an individual p 3-9g for statistical purposes. 28 U.S.C. § 159		personal,	family, or
		bts are not primarily of twith your other schedu		nave nothing to report on this part of the form	n. Check this b	ox and su	ubmit this form to
Offic	ial Form 106S	•		bilities and Certain Statistical Information	า	ŗ	page 1 of 2

Debtor 1 Ruthie Ann Rhodes

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$ 535.00

Opp the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clair	m
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

Fill in this info	rmation to identify your case	and this filing:		
Debtor 1	Ruthie Ann Rhodes			
	First Name	Middle Name Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name Last Name		
United States E	Bankruptcy Court for the: NOR	THERN DISTRICT OF INDIANA		
Case number				☐ Check if this is an amended filing
Official F	orm 106A/B			
	le A/B: Propert	ty .		12/15
think it fits best.	Be as complete and accurate as pore space is needed, attach a sepa	s. List an asset only once. If an asset fits in more than or cossible. If two married people are filing together, both an arate sheet to this form. On the top of any additional page	re equally responsible for su	pplying correct
Part 1: Describ	e Each Residence, Building, Land	I, or Other Real Estate You Own or Have an Interest In		
1. Do you own o	r have any legal or equitable intere	est in any residence, building, land, or similar property?		
■ No. Go to P	art 2.			
☐ Yes. Where	e is the property?			
Part 2: Describ	e Your Vehicles			
	rives. If you lease a vehicle, also trucks, tractors, sport utility v	o report it on Schedule G: Executory Contracts and U ehicles, motorcycles	nexpired Leases.	
3.1 Make:	NISSAN ALTIMA	Who has an interest in the property? Check one	Do not deduct secured cl	ed claims on Schedule D:
Model: Year:	2015	■ Debtor 1 only □ Debtor 2 only	Creditors Who Have Clai	
Approxim Other info	ate mileage: <b>77,000</b>	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Current value of the entire property?	Current value of the portion you own?
		☐ Check if this is community property (see instructions)	\$6,200.00	\$6,200.00
Examples: Bo  ■ No  □ Yes  5 Add the do .pages you	pats, trailers, motors, personal wallar value of the portion you on have attached for Part 2. Write		y entries for	\$6,200.00
Do you own o	r nave any legal or equitable il	nterest in any of the following items?	1	Current value of the portion you own?

Official Form 106A/B Schedule A/B: Property page 1

claims or exemptions.

Doc 1 Filed 03/01/24 Page 11 of 51 Case 24-10206-reg Debtor 1 **Ruthie Ann Rhodes** Case number (if known) 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware ■ Yes. Describe..... MISCELLANEOUS HOUSEHOLD GOODS INCLUDING: SECTIONAL COUCHES, CHAIR, TV STAND, LAMPS, CAT BEDS AND TOYS,

KITCHEN TABLE AND CHAIRS, 2 TWIN BEDSW, ROCKING CHAIR, DRESSER, FANS, FUTON, 4 LITTLE END TABLE BOOK SHELVES, DES, LINENS, ALL COOKING UTENSILS, VACUUM

\$425.00

	lectron	

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

□ No

Yes. Describe.....

3 TV'S, DVD PLAYER, 2 MONITER SCREENS, GAMING SYSTEM, **TGABLET, 3 IPHONES** 

\$760.00

#### 8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

No

☐ Yes. Describe.....

#### 9. Equipment for sports and hobbies

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

■ No

☐ Yes. Describe.....

### 10. Firearms

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

■ No

☐ Yes. Describe.....

### 11. Clothes

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

No

☐ Yes. Describe.....

### 12. Jewelry

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

■ No

☐ Yes. Describe.....

### 13. Non-farm animals

Examples: Dogs, cats, birds, horses

□ No

Yes. Describe.....

CAT \$0.00

### 14. Any other personal and household items you did not already list, including any health aids you did not list

■ No

☐ Yes. Give specific information.....

De	ebtor 1 Ruthie Ann Rho	odes		Case number (if known)	Case number (if known)		
15		•	including any entries for pages you have attached	\$1,185.00			
Pa	art 4: Describe Your Financial	Asset	s				
Do	o you own or have any lega	l or e	quitable interest in any o	of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.		
	Cash Examples: Money you have □ No ■ Yes	•	• •	n a safe deposit box, and on hand when you file your petitio	n		
				Cash	\$110.00		
				certificates of deposit; shares in credit unions, brokerage he the same institution, list each.  Institution name:	ouses, and other similar		
	•	17.1.	CHECKING	CAPITAL ONE 360	\$135.75		
	,	17.2.	SSDI FUNDS	DIRECT EXPRESS - CARD FOR DEBTOR'S SOCIAL SECURITY MONEY TO BE DEPOSITED	\$3,353.14		
		17.3.	SSI FUNDS	DIRECT EXPRESS CARD - THIS IS THE ACCOUNT THAT DEBTOR'S SOCIAL SECURITY IS DEPOSITED IN	\$183.66		
		17.4.	SON'S SOCIAL SECURITY FUNDS ARE DEPOSITED IN TO - FUNDS ARE SENT TO DEBTOR	DIRECT EXPRESS	\$111.62		
	Bonds, mutual funds, or p Examples: Bond funds, inv  No □ Yes	estme		ge firms, money market accounts			
19.	Non-publicly traded stock joint venture	and	interests in incorporated	d and unincorporated businesses, including an interest	in an LLC, partnership, and		
	■ No						
	☐ Yes. Give specific inform		about them ne of entity:	% of ownership:			
20.	Negotiable instruments incl	lude p	ersonal checks, cashiers'	e and non-negotiable instruments checks, promissory notes, and money orders. to someone by signing or delivering them.			
	☐ Yes. Give specific informa		about them uer name:				
21.	Retirement or pension acc	count	s	thrift cavings accounts or other pension or profit charing a	lane		

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

■ No

De	ebtor 1	Ruthie Anı	n Rhodes		Case number (if known)				
	☐ Yes. l	ist each acco	unt separately. Type of account:	Institution name:					
22.	Your sh	nare of all unu			ervice or use from a company as, water), telecommunications comp	anies, or others			
				Institution name o	r individual:				
23.	Annuiti ■ No	es (A contract	for a periodic payment of mo	ney to you, either for life or	for a number of years)				
	Yes		Issuer name and description.						
24.	26 U.S.C		tion IRA, in an account in a ), 529A(b), and 529(b)(1).	qualified ABLE program,	or under a qualified state tuition p	rogram.			
		■ No □ Yes Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):							
25.	Trusts, ■ No	equitable or	future interests in property	(other than anything liste	d in line 1), and rights or powers e	xercisable for your benefit			
	_	Give specific i	information about them						
	Examp. ■ No	les: Internet de	trademarks, trade secrets, omain names, websites, processinformation about them						
		·	s, and other general intangil	bles					
	Examp. ■ No	les: Building p	ermits, exclusive licenses, co	operative association holding	ngs, liquor licenses, professional licer	nses			
	_	Give specific i	information about them						
M	oney or p	property owe	d to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.			
28.	Tax refu	unds owed to	you			·			
	■ No □ Yes. 0	Give specific in	nformation about them, includ	ing whether you already file	d the returns and the tax years				
29.	Family : Examp		or lump sum alimony, spousa	I support, child support, ma	ntenance, divorce settlement, proper	ty settlement			
	_	Give specific in	nformation						
30.	Other amounts someone owes you  Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else								
	■ No □ Yes.	Give specific i	information						
31.		t <b>s in insuranc</b> les: Health, dis		th savings account (HSA);	credit, homeowner's, or renter's insur	ance			
		Name the insu	rance company of each police Company name:	y and list its value.	Beneficiary:	Surrender or refund value:			
			LIFE INSURANCE TERM - NO CASH	THRU GLOBE LIFE - VALUE	SON	\$0.00			
				-					

Official Form 106A/B Schedule A/B: Property page 4

Debtor 1	Ruthie Ann Rhodes	Case number (if known)	
If you	nterest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurance policy, one has died.	or are currently entitled to rec	eive property because
■ No	one has died.		
	Give specific information		
Exam	s against third parties, whether or not you have filed a lawsuit or made a der ples: Accidents, employment disputes, insurance claims, or rights to sue	mand for payment	
■ No			
☐ Yes.	Describe each claim		
34. <b>Other</b> ⋅	contingent and unliquidated claims of every nature, including counterclaims	s of the debtor and rights to	set off claims
	Describe each claim		
35. Any fii	nancial assets you did not already list		
■ No			
☐ Yes.	Give specific information		
	escribe Any Business-Related Property You Own or Have an Interest In. List any real es		\$3,894.17
37. <b>Do you</b>	own or have any legal or equitable interest in any business-related property?		
■ No. Go	o to Part 6.		
☐ Yes. (	Go to line 38.		
	escribe Any Farm- and Commercial Fishing-Related Property You Own or Have an Inter you own or have an interest in farmland, list it in Part 1.	rest In.	
46. <b>Do yo</b> ı	u own or have any legal or equitable interest in any farm- or commercial fish	ing-related property?	
■ No.	. Go to Part 7.		
☐ Yes	s. Go to line 47.		
Part 7:	Describe All Property You Own or Have an Interest in That You Did Not List Above		
	u have other property of any kind you did not already list?  ples: Season tickets, country club membership		
■ No			
☐ Yes.	Give specific information		
54. <b>Add</b>	the dollar value of all of your entries from Part 7. Write that number here		\$0.00

Official Form 106A/B Schedule A/B: Property page 5

Debtor 1	Ruthie Ann Rhodes		Case number (if known)	
Part 8:	List the Totals of Each Part of this Form			
55. Part 1	: Total real estate, line 2			\$0.00
56. Part 2	2: Total vehicles, line 5	\$6,200.00		
57. Part 3	3: Total personal and household items, line 15	\$1,185.00		
58. Part 4	1: Total financial assets, line 36	\$3,894.17		
59. Part 5	5: Total business-related property, line 45	\$0.00		
60. Part 6	6: Total farm- and fishing-related property, line 52	\$0.00		
61. <b>Part 7</b>	7: Total other property not listed, line 54	+\$0.00		
62. Total	personal property. Add lines 56 through 61	\$11,279.17	Copy personal property total	\$11,279.17
63. Total	of all property on Schedule A/B. Add line 55 + line 62			\$11,279.17

Official Form 106A/B Schedule A/B: Property page 6

131	ll in this inform	ation to identify your	case:							
De	ebtor 1	Ruthie Ann Rhod	<b>es</b> Middle Nar	me		_ast Name				
De	ebtor 2	. not riame	imadio riai		-					
(Sp	oouse if, filing)	First Name	Middle Nar	ne	L	ast Name				
Ur	nited States Ban	kruptcy Court for the:	NORTHERN	DISTRICT OF	INDIA	ANA				
Ca	ase number									
(if I	known)						☐ Check if this is an amended filing			
							amended lilling			
0	fficial For	m 106C								
S	chedule	C: The Pro	perty \	You Cla	im	as Exempt	4/22			
						•				
the	property you lis	ted on Schedule A/B: F attach to this page as	Property (Officia	l Form 106A/B)	as yo	our source, list the property that you	or supplying correct information. Using claim as exempt. If more space is additional pages, write your name and			
spo any fur exe	ecific dollar am y applicable sta nds—may be ur emption to a pa	ount as exempt. Alter atutory limit. Some exe allimited in dollar amou	natively, you n emptions—suc unt. However, i	nay claim the f ch as those for if you claim an	full fa r heal r exen	ir market value of the property be th aids, rights to receive certain I nption of 100% of fair market valu	One way of doing so is to state a sing exempted up to the amount of penefits, and tax-exempt retirement ue under a law that limits the tt, your exemption would be limited			
		the Property You Cla	im as Exempt							
		-		k one only eve	n if vo	our spouse is filing with you.				
٠.	_	iming state and federal	· ·	•	•	, ,				
		•		·	11 0.3	5.C. 9 522(b)(5)				
•		iming federal exemption								
2.		For any property you list on Schedule A/B that you claim as exempt, fill in the information below.								
		n of the property and line hat lists this property		Current value of the portion you own		ount of the exemption you claim	Specific laws that allow exemption			
				the value from lule A/B	Check only one box for each exemption.					
	2015 NISSA	N ALTIMA 77,000 m	iles	\$6,200.00		\$267.00	Ind. Code § 34-55-10-2(c)(2)			
	Line from Sch	edule A/B: <b>3.1</b>				100% of fair market value, up to				
					_	any applicable statutory limit				
	MISCELLAN	IEOUS HOUSEHOL	D	\$425.00		\$425.00	Ind. Code § 34-55-10-2(c)(2)			
		LUDING: SECTION	IAL —	<b>\$425.00</b>	-	<u> </u>	• (,,,,			
		CHAIR, TV STAND, T BEDS AND TOYS	_			100% of fair market value, up to any applicable statutory limit				
	KITCHEN TA	ABLE AND CHAIRS	, , 2			any approadic claratery mini				
		W, ROCKING CHAII FANS, FUTON, 4 LIT								
		BOOK SHELVES, I								
		NS, ALL COOKING UTENSILS,								
	VACUUM Line from Sch	edule A/B: <b>6.1</b>								
	מעת פיעם	PLAYER, 2 MONIT	FR	<b>A=22</b> 22		<b></b>	Ind. Code § 34-55-10-2(c)(2)			
	SCREENS,	GAMING SYSTEM,		\$760.00		\$760.00	a. 0000 3 07-00-10-2(0)(2)			
	TGABLET, 3	B IPHONES edule A/B: <b>7.1</b>				100% of fair market value, up to any applicable statutory limit				

### Case 24-10206-reg Doc 1 Filed 03/01/24 Page 17 of 51

otor 1 Ruthie Ann Rhodes			Case number (if known)	
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own		ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
CAT Line from Schedule A/B: 13.1	\$0.00		\$0.00	Ind. Code § 34-55-10-2(c)(2
Ellie Holli Goredale A/B. 1911			100% of fair market value, up to any applicable statutory limit	
Cash Line from Schedule A/B: 16.1	\$110.00		\$110.00	Ind. Code § 34-55-10-2(c)(3
Ellie Holli Goricadie A/B. 14.1			100% of fair market value, up to any applicable statutory limit	
CHECKING: CAPITAL ONE 360 Line from Schedule A/B: 17.1	\$135.75		\$135.75	Ind. Code § 34-55-10-2(c)(3
zine nem cenedale 702.			100% of fair market value, up to any applicable statutory limit	
SSDI FUNDS: DIRECT EXPRESS - CARD FOR DEBTOR'S SOCIAL	\$3,353.14		\$3,353.14	42 U.S.C. § 407
SECURITY MONEY TO BE DEPOSITED Line from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit	
SSI FUNDS: DIRECT EXPRESS CARD	\$183.66		\$183.66	42 U.S.C. § 407
DEBTOR'S SOCIAL SECURITY IS DEPOSITED IN			100% of fair market value, up to any applicable statutory limit	
Line from Schedule A/B: 17.3				
SON'S SOCIAL SECURITY FUNDS ARE DEPOSITED IN TO - FUNDS ARE	\$111.62		\$111.62	42 U.S.C. § 407
SENT TO DEBTOR: DIRECT EXPRESS Line from Schedule A/B: 17.4			100% of fair market value, up to any applicable statutory limit	
LIFE INSURANCE THRU GLOBE LIFE - TERM - NO CASH VALUE	\$0.00		\$0.00	Ind. Code §§ 27-1-12-14(e) 27-2-5-1(b)
Beneficiary: SON Line from Schedule A/B: 31.1			100% of fair market value, up to any applicable statutory limit	2. 2 3 1(3)
Are you claiming a homestead exemption (Subject to adjustment on 4/01/25 and every 3 ■ No ■ Yes. Did you acquire the property covered	3 years after that for ca	ases fi	·	,
□ No □ Yes				

	Case	24 10200 Teg Doc 1	Tiled 00/	01/24   age :	10 01 31	
Fill in this inforn	nation to identify you	ur case:				
Debtor 1	Ruthie Ann Rhe	ndes				
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bar	nkruptcy Court for the	: NORTHERN DISTRICT OF IN	IDIANA			
Case number						
(if known)		<del></del>			☐ Check	if this is an
					amend	ded filing
Official Form	n 106D					
		s Who Have Claims	Secured	d by Property	V	12/15
<u> </u>	D. Cicartors	Wile Have Claims	<u> </u>	a by 1 Topcit	у	12/13
		If two married people are filing togetl out, number the entries, and attach it				
, ,	have claims secured b	y your property?				
☐ No. Check	this box and submit t	this form to the court with your othe	r schedules. Yo	ou have nothing else to	o report on this form.	
_	all of the information	•		ou		
		below.				
Part 1: List Al	II Secured Claims			Column A	Column B	Column C
		more than one secured claim, list the cress a particular claim, list the other creditor		Amount of claim	Value of collateral	Unsecured
		ical order according to the creditor's nan		Do not deduct the	that supports this	portion
2.1 BRIDGEC	DECT	Describe the property that secures	the claim:	value of collateral. \$5,933.00	claim \$6,200.00	If any <b>\$0.00</b>
Creditor's Name		2015 NISSAN ALTIMA 77,00		φ5,955.00	φ0,200.00	<b>\$0.00</b>
		2013 NISSAN ALTIMA 11,00	70 IIIIes			
7300 E HA	AMPTON AVE					
#101		As of the date you file, the claim is: apply.	: Check all that			
Mesa, AZ	85209	Contingent				
Number, Street,	, City, State & Zip Code	☐ Unliquidated				
		☐ Disputed				
Who owes the de	ebt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as	mortgage or sec	cured		
Debtor 2 only		car loan)				
☐ Debtor 1 and De	ebtor 2 only	☐ Statutory lien (such as tax lien, me	echanic's lien)			
☐ At least one of the	he debtors and another	☐ Judgment lien from a lawsuit				
Check if this classic community de		Other (including a right to offset)	VEHICLE L	.OAN		
Date debt was incu	urred 2020	Last 4 digits of account num	nber			
	•	Column A on this page. Write that nun		\$5,93	3.00	
If this is the last Write that number		the dollar value totals from all pages	i.	\$5,93	3.00	

### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

			9			
Fill in this infor	rmation to identify your	case:				
Debtor 1	Ruthie Ann Rhod	es				
	First Name	Middle Nar	me La	ast Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Nar	me La	ast Name		
United States Ba	ankruptcy Court for the:	NORTHERN	DISTRICT OF INDIA	NA		
Case number (if known)						Check if this is an amended filing
	E/F: Creditors W					12/15
any executory cor Schedule G: Exec Schedule D: Credi eft. Attach the Co name and case nu	ntracts or unexpired leases utory Contracts and Unexp itors Who Have Claims Sec ontinuation Page to this pag umber (if known).	that could resul ired Leases (Off ured by Property je. If you have no	t in a claim. Also list e icial Form 106G). Do no y. If more space is need o information to report	xecutory ot include ded, copy	Part 2 for creditors with NONPRIORITY of contracts on Schedule A/B: Property (Of e any creditors with partially secured clais the Part you need, fill it out, number the do not file that Part. On the top of any action	ficial Form 106A/B) and on ms that are listed in entries in the boxes on the
	All of Your PRIORITY Un					
	tors have priority unsecure	d claims against	you?			
No. Go to	Part 2.					
☐ Yes.						
Part 2: List A	All of Your NONPRIORIT	Y Unsecured (	Claime			
	tors have nonpriority unsec					
		_	•			
□ No. You ha	ave nothing to report in this p	art. Submit this fo	rm to the court with your	other sch	nedules.	
Yes.						
unsecured cla	aim, list the creditor separately	y for each claim. I	For each claim listed, ide	ntify what	o holds each claim. If a creditor has more type of claim it is. Do not list claims already n three nonpriority unsecured claims fill out	included in Part 1. If more
						Total claim
4.1 <b>AMAZ</b> (	ON PRIME - CHASE	ı	Last 4 digits of account	t number		\$2,718.00
Nonpriori	ity Creditor's Name		When was the debt inc		2020	
Number	Street City State Zip Code		As of the date you file,	the claim	is: Check all that apply	
_	urred the debt? Check one.		_			
■ Debto	•		Contingent			
Debto	•		Unliquidated			
_	or 1 and Debtor 2 only	_	Disputed		Labelia	
	ast one of the debtors and and	Juici	Type of NONPRIORITY	unsecure	ed claim:	
☐ Chec debt	k if this claim is for a com	iluliity	Student loans	.t af c	cretical agreement on division that we will	
	aim subject to offset?		□ Obligations arising ou eport as priority claims	л от а sep	aration agreement or divorce that you did no	JL
■ No		1	Debts to pension or p	rofit-shari	ng plans, and other similar debts	
☐ Yes		ĺ	Other. Specify CR	EDIT C	ARD	
		'	— Juliel. Opecity			

Debtor 1 Ruthie Ann Rhodes		Case number (if known)					
4.2	AVANT	Last 4 digits of account number	\$1,274.00				
	Nonpriority Creditor's Name PO BOX 1429	When was the debt incurred? 2019					
	Carol Stream, IL 60132  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	Yes	■ Other. Specify CREDIT CARD					
4.3	BANK OF AMERICA ALLEGIANT	Last 4 digits of account number	\$915.00				
	Nonpriority Creditor's Name PO BOX 851001 Dallas, TX 75285	When was the debt incurred? 2019					
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.						
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts					
	□Yes	■ Other. Specify CREDIT CARD					
4.4	CAPITAL ONE	Last 4 digits of account number	\$2,896.00				
	Nonpriority Creditor's Name PO BOX 4069 Carol Stream. IL 60197	When was the debt incurred? 2018					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	Yes	■ Other. Specify CREDIT CARD					
		11.17					

Debtor 1 Ruthie Ann Rhodes		Case number (if known)	
4.5	CHASE FREEDOM UNLIMITED	Last 4 digits of account number	\$2,426.00
	Nonpriority Creditor's Name PO BOX 1548 Wilmington, DE 19886	When was the debt incurred? 2018	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify CREDIT CARD	
4.6	CITI	Last 4 digits of account number	\$1,324.00
	Nonpriority Creditor's Name PO BOX 9001037	When was the debt incurred? 2020	
	Louisville, KY 40290  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	• • • • • • • • • • • • • • • • • • • •	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify CREDIT CARD	
4.7	CITI DIAMOND PREFERRED	Last 4 digits of account number	\$1,507.00
	Nonpriority Creditor's Name PO B OX 9001037 Louisville, KY 40290	When was the debt incurred? 2022	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims  ☐ Debts to pension or profit-sharing plans, and other similar debts	
	■ No		
	Yes	■ Other. Specify CREDIT CARD	

Debto	or 1 Ruthie Ann Rhodes	Case number (if known)					
4.8	CREDIT ONE BANK	Last 4 digits of account number	\$1,659.00				
	Nonpriority Creditor's Name PO BOX 60500	When was the debt incurred? 2020					
	City of Industry, CA 91716  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	□ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	☐ Yes	■ Other. Specify CREDIT CARD					
4.9	DISCOVER	Last 4 digits of account number	\$3,897.00				
	Nonpriority Creditor's Name PO BOX 6103	When was the debt incurred? 2021					
	Carol Stream, IL 60197  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	Debtor 1 only	Пол					
	Debtor 2 only	☐ Contingent ☐ Unliquidated					
	Debtor 1 and Debtor 2 only	_ ·					
	☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	□Yes	■ Other Specify					
4.1	GOOD YEAR	Last 4 digits of account number	\$842.00				
0	Nonpriority Creditor's Name		<del></del>				
	PO BOX 9001006 Louisville, KY 40290	When was the debt incurred? 2018					
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.	_					
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	Yes	■ Other. Specify CREDIT CARD					
		· · · · · · · · · · · · · · · · · · ·					

or 1 Ruthie Ann Rhodes	Case number (if known)				
MEDCURY CARD		¢2.404.00			
MERCURY CARD  Nonpriority Creditor's Name	Last 4 digits of account number	\$2,401.00			
PO BOX 84064	When was the debt incurred? 2018				
Columbus, GA 31908					
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
_					
Debtor 1 only	☐ Contingent				
Debtor 2 only	Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
☐ Yes	■ Other Specify CREDIT CARD				
MERRICK BANK	Last 4 digits of account number	\$1,581.00			
Nonpriority Creditor's Name PO BXO 660702	When was the debt incurred? 2015				
Dallas, TX 75266	when was the dept incurred?				
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
Who incurred the debt? Check one.					
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community	☐ Student loans				
debt	$\square$ Obligations arising out of a separation agreement or divorce that you did not				
Is the claim subject to offset?	report as priority claims				
No	Debts to pension or profit-sharing plans, and other similar debts				
Yes	■ Other. Specify CREDIT CARD				
MOUELA		£22.020.00			
MOHELA  Nonpriority Creditor's Name	Last 4 digits of account number	\$33,938.00			
PO BOX 790233	When was the debt incurred? 1996				
Saint Louis, MO 63179					
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
Who incurred the debt? Check one.					
Debtor 1 only	☐ Contingent				
☐ Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	☐ Disputed				
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	□ Debts to pension or profit-sharing plans, and other similar debts				
■ No					
☐ Yes	Other, Specify STUDENT LOANS				

Debte	or 1 Ruthie Ann Rhodes	Case number (if known)					
4.1	ONE MAIN FINANCIAL		<b>#0.700.00</b>				
4	ONE MAIN FINANCIAL	Last 4 digits of account number	\$2,736.00				
	Nonpriority Creditor's Name PO BOX 981037	When was the debt incurred? 2023					
	Boston, MA 02298  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.	As of the date you me, the damins. Oneck an that apply					
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	_ `					
	<u> </u>	☐ Disputed  Type of NONPRIORITY unsecured claim:					
	☐ At least one of the debtors and another	☐ Student loans					
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims					
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	Yes	■ Other. Specify CREDIT CARD					
4.1			*				
5	PETAL CARD/WEBBA	Last 4 digits of account number	\$1,288.00				
	Nonpriority Creditor's Name PO BOX 105168 MSC 166931 Atlanta, GA 30348	When was the debt incurred? 2019					
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	□ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims					
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts					
	□Yes	■ Other. Specify					
4.1	PLUS FINANCE		\$939.00				
6	Nonpriority Creditor's Name	Last 4 digits of account number	ψ333.00				
	PO BOX 659065	When was the debt incurred? 2021					
	Dallas, TX 75226						
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	_	_					
	■ Debtor 1 only	Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	Disputed					
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	☐ Yes	Other. Specify  CREDIT CARD					
	Tes     Tes	Other. Specify CREDIT CARD					

Debtor	1 Ruthie	An	n Rhodes		Case nu	mber (if k	nown)		
4.1			FINANCE	Last 4 digits of account number			_	\$2,400	.00
	Nonpriority 0 9921 DUI STE 120		itor's Name NT CIRCLE DR WEST	When was the debt incurred?	2024			_	
			IN 46825						
			City State Zip Code he debt? Check one.	As of the date you file, the claim	is: Check	all that ap	pply		
	_								
	Debtor 1	,		☐ Contingent					
	Debtor 2	-		☐ Unliquidated					
	_		Debtor 2 only	Disputed					
	☐ At least	one o	of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
		f this	s claim is for a community	☐ Student loans					
		ı sub	pject to offset?	Obligations arising out of a separeport as priority claims			•	ot	
	No			☐ Debts to pension or profit-sharir	•		similar debts		
	☐ Yes			Other. Specify PERSONA	L LOAN	l			
4.1 8	SWISS C	_		Last 4 digits of account number			-	\$310	.00
	1112 7TH	ł۸۱	/E	When was the debt incurred?	2019				
Monroe, WI 53566  Number Street City State Zip Code  Who incurred the debt? Check one.			City State Zip Code	As of the date you file, the claim	is: Check	all that ap	pply		
	Debtor 1	only	/	☐ Contingent					
	Debtor 2	2 only	/	☐ Unliquidated					
	Debtor 1	and	Debtor 2 only	☐ Disputed					
	☐ At least	one o	of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if	f this	s claim is for a community	☐ Student loans					
	debt		pject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No			Debts to pension or profit-sharing	ng plans, a	and other s	similar debts		
	☐ Yes			Other. Specify CREDIT CA	ARD				
Part 3:	List Oth	ners	to Be Notified About a Debt T	hat You Already Listed					
is tryii have i notifie	ng to collect more than or ed for any de	t fror ne ci ebts	n you for a debt you owe to some reditor for any of the debts that yo in Parts 1 or 2, do not fill out or su	. •	n Parts 1	or 2, then	list the collection age	ency here. Similarly, if yo	ou
Part 4:	Add the	e An	nounts for Each Type of Unse	cured Claim					
	the amounts of unsecured			This information is for statistical r	reporting	purposes	only. 28 U.S.C. §159.	Add the amounts for ea	ch
		٥.	Democratic access of all the state				Total Claim		
Total claims		6a.	Domestic support obligations		6a.	\$	0.	00	
from Pa	rt 1	6b.	Taxes and certain other debts yo	u owe the government	6b.	\$	0.	00	
		6c.	Claims for death or personal inju	ry while you were intoxicated	6c.	\$		00	
		6d.	Other. Add all other priority unsecu	red claims. Write that amount here.	6d.	\$	0.	00	
		6e.	Total Priority. Add lines 6a through	n 6d.	6e.	\$	0.	00	
							Total Claim		
Total		6f.	Student loans		6f.	\$	Total Claim 0.	00	
claims from Pa	rt 2	6g.	Obligations arising out of a sepa	ration agreement or divorce that	6g.	\$	0.	00	

### Debtor 1 Ruthie Ann Rhodes

Case number (if known)

- you did not report as priority claims
  6h. Debts to pension or profit-sharing plans, and other similar debts
- 6i. **Other.** Add all other nonpriority unsecured claims. Write that amount here.
- 6j. Total Nonpriority. Add lines 6f through 6i.

6h.	\$ 0.00
6i.	\$ 65,051.00

65,**051.00** 

### Case 24-10206-reg Doc 1 Filed 03/01/24 Page 27 of 51

Fill in this infor	rmation to identify your	case:		
Debtor 1	Ruthie Ann Rhod	es		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF INDIANA	
Case number				
(if known)				☐ Check if this is a
				amended filing

### Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	<b>.</b>				Out to subject the anatomic and have the form
'	Person or	Name, Number	whom you have the r, Street, City, State and ZIP	Code	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				
	Number	Street			
	City		State	ZIP Code	<del>_</del>
2.4					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.5					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_

	s information to identify your	case:			
Debtor 1	Ruthie Ann Rho	des			
<b>D</b> 1 / 0	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fil	iling) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRICT	OF INDIANA		
Case num	mber				- Object Williams
(II KNOWN)					Check if this is an amended filing
Officia	al Form 106H				
	dule H: Your Cod	lebtors			12/15
our name	e and case number (if known  you have any codebtors? (If	). Answer every question			of any Additional Pages, write
Arizon  No Ye  3. In Co in line	e 2 again as a codebtor only	n, Nevada, New Mexico, Pu nuse, or legal equivalent live tors. Do not include your if that person is a guaran	erto Rico, Texas, Wash with you at the time? spouse as a codebtol tor or cosigner. Make	r if your spouse is filing sure you have listed the	with you. List the person shown creditor on Schedule D (Official
	Column 2.	rrollii 100E/F), or Sched	ule G (Official Forfit R	oog). Use Schedule D, S	chedule E/F, or Schedule G to fil
out C	Column 1: Your codebtor	IP Code			
out	Name, Number, Street, City, State and 2			Check all schedules	itor to whom you owe the debt that apply:
				_	
3.1				Check all schedules  ☐ Schedule D, line ☐ Schedule E/F, lin ☐ Schedule G, line	that apply:
	Name, Number, Street, City, State and 2			□ Schedule D, line □ Schedule E/F, lin	that apply:
	Name, Number, Street, City, State and Z	State	ZIP Code	□ Schedule D, line □ Schedule E/F, lin	that apply:
	Name, Number, Street, City, State and Z	State	ZIP Code	□ Schedule D, line □ Schedule E/F, lin	that apply:
3.1	Name, Number, Street, City, State and Z	State	ZIP Code	☐ Schedule D, line☐ Schedule E/F, lin☐ Schedule G, line☐	that apply:  e e

Official Form 106H Schedule H: Your Codebtors Page 1 of 1

E:II	in this information to	identifyygyra					Ī				
	in this information to btor 1	Ruthie Ann I									
	btor 2 buse, if filing)					_					
Uni	ited States Bankrupto	cy Court for the	NORTHERN DISTRIC	CT OF INDIANA							
(If kr	se number	1061					□ A		d filing ent showin	ng postpetition ollowing date:	chapter
	fficial Form chedule I: Y						N	1M / DD/ Y	YYY		12/15
sup spo atta Par	plying correct infor use. If you are sepach a separate sheet	mation. If you trated and you t to this form. ( Employment	sible. If two married peo are married and not filin r spouse is not filing wi On the top of any addition	ng jointly, and your th you, do not inclu	spouse i ude inforr	s liv natio	ing with on abou	you, incl your spo	ude informuse. If m	mation about ore space is i	your needed,
1.	Fill in your emploinformation.	yment		Debtor 1				Debtor 2	or non-fi	iling spouse	
	If you have more the attach a separate prinformation about a employers.	page with	Employment status  Occupation	☐ Employed  ■ Not employed				☐ Emple	-		
	Include part-time, s self-employed work		Employer's name								
	Occupation may in or homemaker, if it		Employer's address								
			How long employed to	nere?				_			
Par	Give Deta	ails About Mon	thly Income								
spou	use unless you are so	eparated.	ate you file this form. If y	·						-	
	ou or your non-filing s e space, attach a ser		ore than one employer, co this form.	ombine the information	on for all e	mplo	oyers for	that perso	n on the li	ines below. If y	you need
							For Del	otor 1		btor 2 or ing spouse	
2.			ry, and commissions (becalculate what the month)		2.	\$		0.00	\$	N/A	
3.	Estimate and list	monthly overti	me pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Ir	ncome. Add lin	e 2 + line 3.		4.	\$		0.00	\$	N/A	

Official Form 106l Schedule I: Your Income page 1

Deb	tor 1	Ruthie Ann Rhodes		C	Case number (if known)			
	Сор	y line 4 here	4.		For Debtor 1		Debtor 2 or n-filing spouse N/A	
5.	l ist	all payroll deductions:				_		
J.	5a. 5b. 5c. 5d. 5e. 5f. 5g. 5h.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance Domestic support obligations Union dues Other deductions. Specify:	5a 5b 5c 5d 5e 5f. 5g	). ;. l. ).	\$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00	\$_ \$_ \$_ \$_ \$_ + \$_	N/A N/A N/A N/A N/A N/A N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	\$_	N/A	
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	\$_	N/A	
8.	8b. 8c. 8d. 8e. 8f. 8g. 8h.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  Interest and dividends  Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  Unemployment compensation  Social Security  Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify: SS SURVIVOR BENEFITS FOR SON  FOOD STAMPS  Pension or retirement income Other monthly income. Specify:	8a 8b 8c 8d 8e	).	\$ 0.00 \$ 0.00 \$ 0.00 \$ 774.00 \$ 845.00 \$ 0.00 \$ 0.00 \$ 0.00	\$_ \$_ \$\$ \$_ +	N/A N/A N/A N/A N/A N/A N/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	2,154.00	\$	N/A	
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_	2,154.00 + \$		<b>N/A</b> = \$	2,154.00
	Incluothe Do r Spe	the amount in the last column of line 10 to the amount in line 11. The rest e that amount on the Summary of Schedules and Statistical Summary of Certain	depe availa ult is	able	to pay expenses list	ed in 3 — ncome	11. +\$	0.00
13.	Do y	you expect an increase or decrease within the year after you file this form?  No.  Yes. Explain:	?				Combin monthly	2,154.00 ed v income

Official Form 106l Schedule I: Your Income page 2

Fill	in this informa	tion to identify yo	our case:			I		
	tor 1	Ruthie Ann				Choo	ck if this is:	
Den	tor i	Ruthle Ann	Knodes				An amended filing	
	tor 2 buse, if filing)						A supplement show 13 expenses as of	ving postpetition chapter
(Spc	ouse, ii iiiing)					_		the following date:
Unit	ed States Bankr	uptcy Court for the	: NORTH	HERN DISTRICT OF INDIA	ANA		MM / DD / YYYY	
1	e number nown)							
		rm 106J <b>J: Your</b>	Eyner	1606				12/15
Be info	as complete a	and accurate as	s possible eded, atta	. If two married people ar ich another sheet to this				or supplying correct
Par		ibe Your House	ehold					
1.	□N	o line 2. s Debtor 2 live	•	ate household? al Form 106J-2, <i>Expens</i> es	s for Separate House	ehold of Debi	tor 2.	
2.	Do vou have	e dependents?	□ No					
	Do not list Debtor 2.	•	Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state dependents				SON		14	□ No ■ Yes
								□ No
								□ Yes □ No
								☐ Yes
								□ No
2	Da							☐ Yes
3.	expenses of	enses include f people other t d your depende	han <sub>—</sub>	No Yes				
exp	imate your ex		our bankr	y Expenses uptcy filing date unless y y is filed. If this is a supp				
the		n assistance an		government assistance i cluded it on <i>Schedule I:</i> \			Your exp	enses
4.		or home owners		ses for your residence. I	nclude first mortgag	e 4. \$		725.00
	If not includ	led in line 4:						
						10 °C		0.00
		estate taxes rty, homeowner's	s. or renter	's insurance		4a. \$ 4b. \$		0.00 25.00
		•	•	ıpkeep expenses		4c. \$		0.00
		owner's associa				4d. \$		0.00
5.	Additional r	nortgage paym	ents for yo	our residence, such as ho	me equity loans	5. \$		0.00

<b>Utilit</b> i 6a. 6b.	i <b>es:</b> Electricity, heat, natural gas			
6a.				
		6a.	\$	250.00
OD.	Water, sewer, garbage collection	6b.		0.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.		0.00
6d.	Other. Specify: CABLE/INTERNET	6d.	· -	30.00
ou.	CELL PHONE		\$	
<b>-</b>			·	70.00
	and housekeeping supplies	7.	·	535.00
	care and children's education costs	8.	·	0.00
	ing, laundry, and dry cleaning	9.	·	0.00
	onal care products and services	10.	·	40.00
	cal and dental expenses	11.	\$	0.00
	sportation. Include gas, maintenance, bus or train fare.	12.	¢.	120.00
	ot include car payments.		·	
	tainment, clubs, recreation, newspapers, magazines, and books	13.	·	0.00
	itable contributions and religious donations	14.	\$	0.00
. Insur				
	ot include insurance deducted from your pay or included in lines 4 or 20.	4.5	•	
	Life insurance	15a.	•	20.00
	Health insurance	15b.	·	0.00
15c.	Vehicle insurance	15c.	·	131.00
	Other insurance. Specify:	15d.	\$	0.00
	s. Do not include taxes deducted from your pay or included in lines 4 or 20.			
Spec	·	16.	\$	0.00
	Ilment or lease payments:			
	Car payments for Vehicle 1	17a.	·	0.00
17b.	Car payments for Vehicle 2	17b.	\$	0.00
17c.	Other. Specify:	17c.	\$	0.00
17d.	Other. Specify:	17d.	\$	0.00
. Your	payments of alimony, maintenance, and support that you did not report as	<b>S</b>		
dedu	cted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	·	0.00
. Othe	r payments you make to support others who do not live with you.		\$	0.00
Spec	ify:	19.		
	r real property expenses not included in lines 4 or 5 of this form or on Sch			
20a.	Mortgages on other property	20a.	\$	0.00
20b.	Real estate taxes	20b.	\$	0.00
20c.	Property, homeowner's, or renter's insurance	20c.	\$	0.00
20d.	Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	Homeowner's association or condominium dues	20e.	\$	0.00
	r: Specify: LICENSE PLATES		+\$	9.00
	O REPAIRS/MAINTENANCE		+\$	50.00
	CARE/FOOD/VET		+\$ +\$	100.00
PEI	CARE/FOOD/VET		-Ψ	100.00
. Calcı	ulate your monthly expenses			
	Add lines 4 through 21.		\$	2,105.00
22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	Add line 22a and 22b. The result is your monthly expenses.		\$	2,105.00
	and the second to your monthly expended.			2,100.00
	ulate your monthly net income.			
23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.		2,154.00
23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	2,105.00
23c.	Subtract your monthly expenses from your monthly income.	00	•	40.00
	The result is your monthly net income.	23c.	\$	49.00
_				
	ou expect an increase or decrease in your expenses within the year after y			oo or doorooo baaassa af -
	cample, do you expect to finish paying for your car loan within the year or do you expect you cation to the terms of your mortgage?	и топдаде	payment to increas	se or decrease decause of a
_				
■ No				
☐ Ye	es. Explain here:			

Fill in this infor	mation to identify your	case:			
Debtor 1	Ruthie Ann Rhod	les			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF INDIANA		
Office States Be	ankruptcy Court for the.	- NORTHERN BIOTRIOT	01 11401/11471		
Case number					Charlett this is an
(ii Kilowii)					Check if this is an amended filing
Official For			Dalitaria Or	de a desta a	
Declara	tion About a	an Individual	Deptor's Sc	chedules	12/15
	18 U.S.C. §§ 152, 1341, 1 ın Below	519, and 3571.			
		one who is NOT an attor	nev to help you fill out	bankruptcy forms?	
■ No	.,				
-					
☐ Yes.	Name of person				Petition Preparer's Notice, ignature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the sum	mary and schedules file	ed with this declaration and	
X /s/ Rut	thie Ann Rhodes		X		
Ruthie	e Ann Rhodes ure of Debtor 1		Signature of	f Debtor 2	
Date	March 1 2024		Date		

		nation to identify you				
De	btor 1	Ruthie Ann Rho	Middle Name	Last Name		
	btor 2 buse if, filing)	First Name	Middle Name	Last Name		
Uni	ited States Ba	nkruptcy Court for the:	NORTHERN DISTRICT C	DF INDIANA		
	se number _				_	theck if this is an mended filing
St	as complete a	of Financial	Affairs for Indivio	re filing together, both are	equally responsible for sup	
		n). Answer every que	, attach a separate sheet to t stion.	this form. On the top of any	y additional pages, write you	ir name and case
Pai		Details About Your Marital state	arital Status and Where You	Lived Before		
٠.	☐ Married		us :			
_	■ Not ma					
2.	During the I	ast 3 years, have you	lived anywhere other than v	where you live now?		
	■ No □ Yes. Lis	st all of the places you	lived in the last 3 years. Do no	ot include where you live now	<i>ı</i> .	
	Debtor 1:		Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
<b>3.</b> stat			ver live with a spouse or leg alifornia, Idaho, Louisiana, Nev			
	■ No □ Yes. Ma	ake sure you fill out <i>Sc</i>	hedule H: Your Codebtors (Of	ficial Form 106H).		
Pai	rt 2 Expla	in the Sources of You	ır Income			
4.	Fill in the tota	al amount of income yo	mployment or from operating ou received from all jobs and a have income that you receive	all businesses, including part-	time activities.	ndar years?
	□ No ■ Yes. Fil	I in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		r year before that: ecember 31, 2022)	■ Wages, commissions, bonuses, tips	\$1,636.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

	Nu	une Ann	Rhodes				Case	number (if known)			
Include and ot	le inc ther p	ome regard oublic bene	lless of wheth fit payments;	ner that income pensions; rent	e is taxable. Exai tal income; intere	ear or the two previous calendar years? s taxable. Examples of other income are alimony; child support; Social Security, unemployment, income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery income that you received together, list it only once under Debtor 1.					
List ea	ach s	ource and t	he gross inco	me from each	source separate	ely. Do not include inc	ome th	at you listed in lin	ne 4.		
Πи	No										
_		Fill in the de	etails.								
				Debtor 1				Debtor 2			
				Sources of i		Gross income from each source (before deductions exclusions)		Sources of incorporation Describe below.		Gross inc (before de and exclus	ductions
		1 of curre	nt year until nkruptcy:	SSI, SSDI		\$7,881	.00				
		dar year: December	31, 2023 )	SSI, SSA		\$11,670	0.00				
r the ca	alend	lar year be		SSA		\$9,048	3.00				
		December	31, 2022 )								
nuary 1	1 to I			Made Refore	You Filed for B	łankruntov					
nuary 1	1 to I	Certain Pa	yments You		You Filed for B						
rt 3:	1 to I  List ither	Certain Pa Debtor 1's Neither De	nyments You s or Debtor 2 ebtor 1 nor D	's debts prima Debtor 2 has p	arily consumer	debts? mer debts. Consume	r debts	are defined in 11	U.S.C. §	101(8) as "incu	rred by an
rt 3:	1 to I  List ither	Certain Pa Debtor 1's Neither Deindividual p During the No.	yments You or Debtor 2 ebtor 1 nor Deprimarily for a	's debts prima Debtor 2 has p personal, fam	arily consumer orimarily consul nily, or household	debts? mer debts. Consume				101(8) as "incu	rred by an
rt 3:	1 to I  List ither	Certain Pa  Debtor 1's  Neither De  individual p	s or Debtor 2 ebtor 1 nor E orimarily for a 90 days befor Go to line 7 List below e paid that cr	esch creditor to editor. Do not	arily consumer orimarily consuluily, or household r bankruptcy, did to whom you paid include payment	debts? mer debts. Consume. d purpose."	a total	of \$7,575* or mor	re? vments and	d the total amo	unt you
rt 3:	1 to I  List ither	Certain Pa Debtor 1's Neither Deindividual p During the No. Yes	s or Debtor 2 ebtor 1 nor E orimarily for a 90 days befor Go to line 7 List below 6 paid that cr not include	's debts prima Debtor 2 has p personal, fam ore you filed for ceach creditor to each creditor. Do not payments to a	arily consumer orimarily consuluily, or household r bankruptcy, did to whom you paid include payment an attorney for this	debts? mer debts. Consume. d purpose." I you pay any creditor I a total of \$7,575* or use for domestic suppor	a total more in t obliga	of \$7,575* or mor one or more pay tions, such as ch	re? vments and ild suppor	d the total amourt and alimony.	unt you
rt 3:  Are ei	List ither	Certain Pa  Debtor 1's Neither Deindividual p  During the No. Yes  * Subject	s or Debtor 2 ebtor 1 nor Debtor 2 ebtor 1 nor Deprimarily for a 90 days befor Go to line 7 List below e paid that cr not include to adjustment	each creditor to payments to a 4/01/25 ar	arily consumer orimarily consumity, or household or bankruptcy, did no whom you paid include payment an attorney for thind every 3 years orimarily consum	debts? mer debts. Consume. d purpose." I you pay any creditor I a total of \$7,575* or it is for domestic support is bankruptcy case. after that for cases fil	a total more in t obliga ed on c	of \$7,575* or more one or more pay tions, such as cher after the date of	re? vments and ild suppor f adjustme	d the total amourt and alimony.	unt you
rt 3:  Are ei	List ither	Certain Pa  Debtor 1's Neither Deindividual p  During the No. Yes  * Subject  Debtor 1 c  During the	s or Debtor 2 ebtor 1 nor E primarily for a 90 days befor Go to line 7 List below e paid that cr not include to adjustment or Debtor 2 of	each creditor to payments to a ton 4/01/25 are you filed for the payments to a ton 4/01/25 are you filed for you filed for the payments to a ton 4/01/25 are you filed for you	arily consumer orimarily consumity, or household or bankruptcy, did no whom you paid include payment an attorney for thind every 3 years orimarily consum	debts? mer debts. Consume. d purpose." I you pay any creditor I a total of \$7,575* or it is for domestic support is bankruptcy case. after that for cases fil mer debts.	a total more in t obliga ed on c	of \$7,575* or more one or more pay tions, such as cher after the date of	re? vments and ild suppor f adjustme	d the total amourt and alimony.	unt you
rt 3:  Are ei	List ither	Certain Pa  Debtor 1's Neither Deindividual p  During the No. Yes  * Subject  Debtor 1 c  During the	sor Debtor 2 ebtor 1 nor Eprimarily for a 90 days befor Go to line 7 List below a paid that crunot include to adjustment or Debtor 2 or 90 days befor Go to line 7 List below a include pay	each creditor to you filed for	arily consumer orimarily consumity, or household or bankruptcy, did not whom you paid include payment an attorney for thind every 3 years orimarily consumer bankruptcy, did no whom you paid nestic support ob	debts? mer debts. Consume. d purpose." I you pay any creditor I a total of \$7,575* or it is for domestic support is bankruptcy case. after that for cases fil mer debts.	a total more in tobligated on coat a total re and	of \$7,575* or more pay tions, such as cher after the date of of \$600 or more?	re?  ments and ild suppor f adjustme	d the total amount and alimony.  ent.  hat creditor. Do	unt you Also, do
rt 3:	List ither	Certain Pa  Debtor 1's Neither Deindividual   During the No. Yes  * Subject  Debtor 1 c During the	sor Debtor 2 ebtor 1 nor E primarily for a  90 days befor Go to line 7 List below e paid that cr not include to adjustment or Debtor 2 o 90 days befor Go to line 7 List below e include pay attorney for	Presented to the control of the cont	arily consumer orimarily consumity, or household or bankruptcy, did not whom you paid include payment an attorney for thind every 3 years orimarily consumer bankruptcy, did no whom you paid nestic support ob	debts? mer debts. Consumer. I purpose." I you pay any creditor I a total of \$7,575* or its for domestic supportis bankruptcy case. after that for cases fill mer debts. I you pay any creditor I a total of \$600 or mo ligations, such as chill	a total more in t obliga ed on c a total re and d suppo	of \$7,575* or more pay tions, such as cher after the date of of \$600 or more?	re? vments and illd suppor f adjustme d you paid the Also, do no	d the total amount and alimony.  ent.  hat creditor. Do	unt you Also, do not ents to an

Case number (if known)

7.	Within 1 year before you filed for bankrupt <i>Insiders</i> include your relatives; any general prof which you are an officer, director, person in a business you operate as a sole proprietor. alimony.	artners; relatives of any ger n control, or owner of 20% of	neral partners; partne or more of their voting	erships of which yo g securities; and a	u are a genera ny managing a	Il partner; corporations gent, including one for						
	<ul><li>■ No</li><li>□ Yes. List all payments to an insider.</li></ul>											
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment						
8.	Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider.											
	■ No □ Yes. List all payments to an insider											
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment itor's name						
Pai	rt 4: Identify Legal Actions, Repossessio	ons, and Foreclosures	μ									
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.											
	<ul><li>No</li><li>Yes. Fill in the details.</li></ul>											
	Case title Case number	Nature of the case	Court or agency		Status of th	e case						
10.	Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below.											
	<ul><li>No. Go to line 11.</li><li>Yes. Fill in the information below.</li></ul>											
	Creditor Name and Address	Describe the Property  Explain what happened	d	Date		Value of the property						
11.	Within 90 days before you filed for bankru accounts or refuse to make a payment bed  No	ptcy, did any creditor, inc		nancial institution	, set off any a	mounts from your						
	☐ Yes. Fill in the details.  Creditor Name and Address	Describe the action the	e creditor took	Date taker	action was	Amount						
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a		erty in the possessi			fit of creditors, a						
	■ No □ Yes											
Pa	rt 5: List Certain Gifts and Contributions											
13.	Within 2 years before you filed for bankrup  No	ptcy, did you give any gift	s with a total value	of more than \$60	0 per person?							
	Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person	Describe the gifts		Date: the g	s you gave ifts	Value						
	Person to Whom You Gave the Gift and Address:											

Debtor 1 Ruthie Ann Rhodes

Case number (if known)

4.	Within 2 years before you filed for bankru	ptcy,	did you give any gifts or contributior	ns with a to	otal value of more than	\$600 to any charity?
	No					
	Yes. Fill in the details for each gift or con					
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		Describe what you contributed		Dates you contributed	Value
Pai	tt 6: List Certain Losses					
5.	Within 1 year before you filed for bankrup or gambling?	tcy or	since you filed for bankruptcy, did y	you lose ar	nything because of thef	t, fire, other disaster
	■ No					
	Yes. Fill in the details.					
	Describe the property you lost and	Descr	ibe any insurance coverage for the lo	oss	Date of your	Value of property
	how the loss occurred	nclud	e the amount that insurance has paid. L nce claims on line 33 of Schedule A/B:	_ist pending	loss	lost
Pai	t 7: List Certain Payments or Transfers					
16.	Within 1 year before you filed for bankrup	tcv. d	id vou or anvone else acting on vour	r behalf pa	v or transfer any prope	rty to anyone you
	consulted about seeking bankruptcy or pr Include any attorneys, bankruptcy petition pre	repari	ng a bankruptcy petition?	•		, u, o , ou
	□ No					
	Yes. Fill in the details.					
	Person Who Was Paid		Description and value of any prop	ertv	Date payment	Amount of
	Address		transferred	City	or transfer was	payment
	Email or website address Person Who Made the Payment, if Not Yo				made	
	Glaser & Ebbs	u	Attorney Fees		2024	\$950.00
	132 E Berry St		Attorney rees		2024	φ930.00
	Fort Wayne, IN 46802					
	William Associated and the first state of the state of th			- h - h - 16		
17.	Within 1 year before you filed for bankrup promised to help you deal with your credi Do not include any payment or transfer that y	tors o	or to make payments to your creditor		y or transfer any prope	rty to anyone wno
	■ M.					
	■ No □ Yes Fill in the details.					
			December and value of any many		Data marimant	Amount of
	Person Who Was Paid Address		Description and value of any prop transferred	erty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankrup transferred in the ordinary course of your Include both outright transfers and transfers include gifts and transfers that you have already	<b>busir</b> made	ness or financial affairs? as security (such as the granting of a se			
	■ No					
	☐ Yes. Fill in the details.					
	Person Who Received Transfer Address		Description and value of property transferred	paymer	ne any property or nts received or debts exchange	Date transfer was made
	Person's relationship to you			paiu ili	excitative	

Debtor 1 Ruthie Ann Rhodes

Deb	otor 1	Ruthie Ann Rhodes				Case nur	nber (if known)		
10	\\/i4bi	n 10 years before you filed for bankru	ntov	did you transfer or	w proporty to	a colf cottle	ad trust or similar davise	of wh	ioh vou oro o
19.	benef	ii io years belore you med for banking ficiary? (These are often called <i>asset-pr</i> No			y property to a	a sen-setti	ed trust or similar device	OI WII	iicii you are a
		Yes. Fill in the details.							
	Nam	e of trust		Description and v	alue of the pro	operty tran	sferred	Dat mad	e Transfer was de
Par	t 8:	List of Certain Financial Accounts, In	strun	nents, Safe Deposi	Boxes, and S	torage Uni	ts		
	sold, Include house	n 1 year before you filed for bankrupto moved, or transferred? de checking, savings, money market, o es, pension funds, cooperatives, asso No	or oth	ner financial accou	nts; certificate	s of depos			
	<b>–</b> )	Yes. Fill in the details.							
		e of Financial Institution and ress (Number, Street, City, State and ZIP		et 4 digits of count number	Type of acco	ount or	Date account was closed, sold, moved, or transferred	be	Last balance efore closing or transfer
	GEC EAS	ASE BANK DRGETOWN BRANCH IT STATE BLVD Wayne, IN 46815	XX	XX-	■ Checking □ Savings □ Money Ma □ Brokerage □ Other		1/25/2024		\$31.31
21.	cash,	ou now have, or did you have within 1 or other valuables? No Yes. Fill in the details.	year	before you filed for	bankruptcy, a	any safe de	posit box or other depos	itory 1	for securities,
		e of Financial Institution ress (Number, Street, City, State and ZIP Code)		Who else had acc Address (Number, S State and ZIP Code)		Describe	the contents		Do you still nave it?
22.	Have	you stored property in a storage unit	or pla	ace other than your	home within	1 year befo	ore you filed for bankrupt	cy?	
		No							
	□ 1	Yes. Fill in the details.							
		e of Storage Facility ress (Number, Street, City, State and ZIP Code)		Who else has or I to it? Address (Number, S State and ZIP Code)		Describe	the contents		Do you still nave it?
Par	t 9:	Identify Property You Hold or Control	l for S	Someone Else					
23.		ou hold or control any property that so omeone.	omeo	ne else owns? Incl	ude any prope	rty you boı	rrowed from, are storing	for, or	r hold in trust
		No Yes. Fill in the details.							
		er's Name 'ess (Number, Street, City, State and ZIP Code)		Where is the prop (Number, Street, City, S Code)		Describe	the property		Value

Debtor 1 Ruthie Ann Rhodes

Part 10: Give Details About Environmental Information

Case number (if known)

For	the purpose of Part 10, the following definition	ns apply:		
	Environmental law means any federal, state, of toxic substances, wastes, or material into the regulations controlling the cleanup of these s	air, land, soil, surface water, ground	- ·	
	Site means any location, facility, or property a to own, operate, or utilize it, including dispos	•	law, whether you now own, operate,	or utilize it or used
	Hazardous material means anything an enviro		s waste. hazardous substance. toxic	substance.
	hazardous material, pollutant, contaminant, o			,
Rep	ort all notices, releases, and proceedings that	you know about, regardless of wher	n they occurred.	
24.	Has any governmental unit notified you that y	ou may be liable or potentially liable	under or in violation of an environm	ental law?
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of a	ny release of hazardous material?		
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or admir	nistrative proceeding under any envi	ronmental law? Include settlements	and orders.
	■ No			
	Yes. Fill in the details.			
	Case Title	Court or agency	Nature of the case	Status of the
	Case Number	Name Address (Number, Street, City, State and ZIP Code)		case
Par	t 11: Give Details About Your Business or Co	onnections to Any Business		
27.	Within 4 years before you filed for bankruptcy	, did you own a business or have an	ny of the following connections to any	y business?
	☐ A sole proprietor or self-employed in	a trade, profession, or other activity,	either full-time or part-time	
	☐ A member of a limited liability compar	ny (LLC) or limited liability partnersh	ip (LLP)	
	☐ A partner in a partnership			
	☐ An officer, director, or managing exec	cutive of a corporation		
	☐ An owner of at least 5% of the voting	-		
	No. None of the above applies. Go to Pa	rt 12.		
	Yes. Check all that apply above and fill in		S.	
	Business Name	Describe the nature of the business	Employer Identification numbe	
	Address (Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security	number or ITIN.

Dates business existed

Debto	r1 Ruthie Ann Rhodes		Case number (if known)
	lithin 2 years before you filed for bankr stitutions, creditors, or other parties.	uptcy, did you give a financial statement to	anyone about your business? Include all financial
	No Yes. Fill in the details below.		
A	lame Address Number, Street, City, State and ZIP Code)	Date Issued	
Part 1	2: Sign Below		
18 U.S	bankruptcy case can result in fines up .C. §§ 152, 1341, 1519, and 3571.  uthie Ann Rhodes	to \$250,000, or imprisonment for up to 20 y	ears, or both.
	ie Ann Rhodes ture of Debtor 1	Signature of Debtor 2	
Date	March 1, 2024	Date	
Did yo	u attach additional pages to Your State	ement of Financial Affairs for Individuals Fil	ling for Bankruptcy (Official Form 107)?
No			
□ Yes			
Did yo	u pay or agree to pay someone who is	not an attorney to help you fill out bankrup	tcy forms?
No			

☐ Yes. Name of Person \_\_\_\_\_. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Fill in this inform	nation to identify your o	case:		
Debtor 1	Ruthie Ann Rhode			
Debtor 2	First Name	Middle Name	Last Name	
(Spouse if, filing)	First Name	Middle Name	Last Name	_
United States Bar	nkruptcy Court for the:	NORTHERN DIS	TRICT OF INDIANA	
Case number				
(if known)				☐ Check if this is an amended filing
000 : 15	400			
Official For				
Statemen	nt of Intentio	n for Indiv	iduals Filing Under Ch	apter 7 12/15
	vidual filing under chap claims secured by you	. •	I out this form if:	
_	ed personal property a		ot expired	
You must file this	form with the court w	ithin 30 days after	you file your bankruptcy petition or by the	
whiches on the f		e court extends th	e time for cause. You must also send copie	s to the creditors and lessors you list
	ople are filing together d date the form.	in a joint case, bo	th are equally responsible for supplying co	rrect information. Both debtors must
Be as complete a	nd accurate as possib	le. If more space is	s needed, attach a separate sheet to this fo	rm. On the top of any additional pages,
write yo	our name and case nun	nber (if known).	•	
Part 1: List Yo	our Creditors Who Have	Secured Claims		
			Conditions Who House Claims Convent by D	branch (Official Form 100D) fill in the
information be		irt 1 of Schedule D	: Creditors Who Have Claims Secured by P	roperty (Official Form 106D), fill in the
Identify the cre	editor and the property th	nat is collateral	What do you intend to do with the prope secures a debt?	rty that Did you claim the property as exempt on Schedule C?
			Secures a dest:	as exempt on ochedule of
Creditor's BI	RIDGECREST		☐ Surrender the property.	□No
name:	THE OLUME OF THE O		Retain the property and redeem it.	LINO
Description of	0045 NICOAN ALTI	MA 77 000	Retain the property and enter into a	■ Yes
property	2015 NISSAN ALTI	MA 77,000	Reaffirmation Agreement.	
securing debt:			☐ Retain the property and [explain]:	
	ur Unexpired Personal			
			in Schedule G: Executory Contracts and U expired leases are leases that are still in ef	
			the trustee does not assume it. 11 U.S.C. §	
Describe vour ui	nexpired personal prop	erty leases		Will the lease be assumed?
, , , , , , , , , , , , , , , , , , ,	, p p. of			
Lessor's name: Description of lea	has			□ No
Property:	J04			☐ Yes
Lessor's name: Description of lea	sed			□ No
Property:				☐ Yes

Debtor 1 Ruthie Ann Rhodes	Case number (if known)
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Part 3: Sign Below	
Under penalty of perjury, I declare that I have indicated my intention about property that is subject to an unexpired lease.	any property of my estate that secures a debt and any personal
X /s/ Ruthie Ann Rhodes X	O'material (Dalitara)
Ruthie Ann Rhodes Signature of Debtor 1	Signature of Debtor 2
Date March 1, 2024 Date	e

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
\$78	administrative fee	
+ \$15	trustee surcharge	
\$338	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

\$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

# Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://www.uscourts.gov/services-forms/bankruptcy/cre">http://www.uscourts.gov/services-forms/bankruptcy/cre</a> dit-counseling-and-debtor-education-courses.

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/services-forms/bankruptcy/cre">http://www.uscourts.gov/services-forms/bankruptcy/cre</a> dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. B2030 (Form 2030) (12/15)

### United States Bankruptcy Court Northern District of Indiana

In re	Ruthie Ann Rhodes		Case No	) <b>.</b>
		Debtor(s)	Chapter	7
	DISCLOSURE OF COMP	ENSATION OF ATTO	ORNEY FOR D	DEBTOR(S)
co	arsuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 20 ompensation paid to me within one year before the fee rendered on behalf of the debtor(s) in contemplation	iling of the petition in bankrupto	cy, or agreed to be pai	id to me, for services rendered or to
	For legal services, I have agreed to accept		\$	950.00
	Prior to the filing of this statement I have received	ed	\$	950.00
	Balance Due		<b></b>	0.00
2. T	he source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3. T	he source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4. ■	I have not agreed to share the above-disclosed con	mpensation with any other person	on unless they are me	mbers and associates of my law firm.
С	I have agreed to share the above-disclosed compe copy of the agreement, together with a list of the			
5. Iı	n return for the above-disclosed fee, I have agreed to	o render legal service for all asp	ects of the bankruptcy	case, including:
b. c. d.	Analysis of the debtor's financial situation, and repreparation and filing of any petition, schedules, so Representation of the debtor at the meeting of creek Representation of the debtor in adversary proceed. [Other provisions as needed]	statement of affairs and plan who ditors and confirmation hearing,	ich may be required; and any adjourned he	
5. B	y agreement with the debtor(s), the above-disclosed Representation of the debtors in any any other adversary proceeding. Negotiling of reaffirmation agreements and USC 522(f)(2)(A) for avoidance of liens	dischargeability actions, ju otiations with secured cred I applications as needed; p	dicial lien avoidan	market value; preparation and
		CERTIFICATION		
	certify that the foregoing is a complete statement of nkruptcy proceeding.	any agreement or arrangement	for payment to me for	representation of the debtor(s) in
Ma	ırch 1, 2024	/s/ Steven J. Gl	aser	
Da	te	Steven J. Glase		
		Signature of Attor Glaser & Ebbs	rney	
		132 E Berry St		
		F = \ \A/ = \ \ \A/	40000	
		Fort Wayne, IN 260-424-0954	46802 Fax: 260-424-6529	

In re	Ruthie Ann Rhodes		Case No.	
		Debtor(s)	Chapter	7
	VER	IFICATION OF CREDITOR	R MATRIX	
Th	e above-named debtor(s) verifies u	under penalty of perjury that the attached lis	st of creditors is tru	ue and correct to the best of
	e above-named debtor(s) verifies u knowledge.	under penalty of perjury that the attached lis	st of creditors is tru	te and correct to the best of
		under penalty of perjury that the attached lis	at of creditors is tru	ne and correct to the best of
		under penalty of perjury that the attached lis	st of creditors is tru	te and correct to the best of
his/her	knowledge.		et of creditors is tru	e and correct to the best of
		Inder penalty of perjury that the attached lis  /s/ Ruthie Ann Rhodes Ruthie Ann Rhodes	et of creditors is tru	te and correct to the best of

AMAZON PRIME - CHASE 2021 7TH AVE SEATTLE, WA 98121

AVANT PO BOX 1429 CAROL STREAM, IL 60132

BANK OF AMERICA ALLEGIANT PO BOX 851001 DALLAS, TX 75285

BRIDGECREST 7300 E HAMPTON AVE #101 MESA, AZ 85209

CAPITAL ONE PO BOX 4069 CAROL STREAM, IL 60197

CHASE FREEDOM UNLIMITED PO BOX 1548 WILMINGTON, DE 19886

CITI
PO BOX 9001037
LOUISVILLE, KY 40290

CITI DIAMOND PREFERRED PO B OX 9001037 LOUISVILLE, KY 40290

CREDIT ONE BANK PO BOX 60500 CITY OF INDUSTRY, CA 91716 DISCOVER PO BOX 6103 CAROL STREAM, IL 60197

GOOD YEAR PO BOX 9001006 LOUISVILLE, KY 40290

MERCURY CARD PO BOX 84064 COLUMBUS, GA 31908

MERRICK BANK PO BXO 660702 DALLAS, TX 75266

MOHELA PO BOX 790233 SAINT LOUIS, MO 63179

ONE MAIN FINANCIAL PO BOX 981037 BOSTON, MA 02298

PETAL CARD/WEBBA PO BOX 105168 MSC 166931 ATLANTA, GA 30348

PLUS FINANCE PO BOX 659065 DALLAS, TX 75226

REGIONAL FINANCE 9921 DUPONT CIRCLE DR WEST STE 120 FORT WAYNE, IN 46825 SWISS COLONY 1112 7TH AVE MONROE, WI 53566